United States District Court

for the

Southern District of New York

| CARMEN MARIBEL RIVERA ,individually and on behalf of others similarly situated, |))) |
|---|------------------|
| Plaintiff(s) |) |
| V. | Civil Action No. |
| JM FAMILY CHILD DAY CARE LLC(d/b/a JM FAMILY CARE), and JOSE MARTE, |))) |
| Defendant(s) |) |

SUMMONS IN A CIVIL ACTION

To: (Defendant's name and address)

Jose Marte 1326 Grand Concourse, Bronx, NY, 10456

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

Michael Faillace ESQ. 60 East 42nd Street, Suite 4510 New York, New York 10165

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

Date: 3/10/2025 S/ G. Pisarczyk

Signature of Clerk or Deputy Clerk

Wollusj

Civil Action No.

PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (1))

| was re | eceived by me on (date) | · | | | | |
|--------|--|------------------------------------|----------------------------------|------|--------|--|
| | ☐ I personally served | the summons on the individual a | at (place) | | | |
| | | | on (date) | ; or | | |
| | ☐ I left the summons | at the individual's residence or u | usual place of abode with (name) | | | |
| | , a person of suitable age and discretion who resides there, | | | | | |
| | on (date), and mailed a copy to the individual's last known address; or | | | | | |
| | ☐ I served the summo | ons on (name of individual) | | , | who is | |
| | designated by law to accept service of process on behalf of (name of organization) | | | | | |
| | - | | on (date) | ; or | | |
| | ☐ I returned the sumn | nons unexecuted because | | | ; or | |
| | ☐ Other (specify): | | | | | |
| | My fees are \$ | for travel and \$ | for services, for a total of \$ | 0 | | |
| | I declare under penalty | of perjury that this information | is true. | | | |
| Date: | | | | | | |
| | | | Server's signature | | | |
| | | | Printed name and title | | | |
| | | | | | | |
| | | | Server's address | | | |

Additional information regarding attempted service, etc:

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